NINTH QUARTERLY REPORT OF MONITORING COMMITTEE FOR GAS RELIEF HOSPITALS

The Monitoring Committee paid visit to some of the Hospitals and Dispensaries, during the period under report. Brief Notes therefore are as under:

I- VISIT OF HOMEOPATHY DISPENSARY, TILAJAMALPURA, BHOPAL
a) The note of visit of Homeopathy Dispensary, Tilajamalpura Bhopal run by State Government Department of Gas Relief & Rehabilitation, Govt. of M.P. is as per ANN-1. As noted in ANN-1 though the dispensary was receiving sufficient supply of some of the medicines, however, Incharge of the Hospital Dr. A.P. Singh Baghel informed that though most of the medicines are supplied and are available in adequate quantity, but some other medicines which are required for treatment of common diseases especially branded and packaged medicines which are mostly in demand, are in short supply.

b) It was therefore directed that concerned authority in the Ayush department should look into the matter and rationalize the supply of all required medicines. It was also directed that ampules/containers and sugar/glucose globules to be supplied in sufficient quantity. The matter was referred to the Director, Ayush as per letter of the Monitoring Committee ANN-A but no response have been received about the same.

c) Security arrangement of the dispensary and the condition of the building was not found to be satisfactory. The same was directed to be improved.
II- VISIT OF RASOOL AHMED SIDDQUI PULMONARY MEDICINE CENTRE

a) The Monitoring Committee visited Rasool Ahmed Siddiqui Pulmonary Medicine Centre on 24/08/2016. The report of inspection visit is ANN-2.

b) The hospital seems to be busy one as large number of patient come to the hospital for treatment. During the visit, Superintendent of the Hospital Dr. R.K. Saxena informed that requisition of required equipments for Pathology Department as are detailed in ANN-2 has been sent but the same has not been received in the hospital. The Monitoring Committee observed that the Director, G.R.R. should look into the matter and take appropriate steps.

c) Similarly, some of the instruments were stated by the Superintendent to be non functional and he requested that the same be written off.

d) Vacant posts of Doctors were also directed to be filled up. It was further directed that ventilators be provided and that facilities for emergency treatment should be improved.

e) Monitoring Committee observed that Director, G.R.R. be requested to take appropriate measures in the above regard. Letters as per ANN-3 have been sent to Director, Department of Gas Relief and Rehabilitation. However, response is still awaited.

III- VISIT OF BHOPAL MEMORIAL HOSPITAL & RESEARCH CENTRE

a) Monitoring Committee visited BMHRC on 13/10/2016. Several pending matters were discussed with the Director, BMHRC which are detailed in the report of the visit which is as per ANN-4.
b) It was again emphasized that the rules, regulations of recruitment and service conditions etc. of the Doctors and other employees serving in BMHRC should be finalized, without further delay and the matter should be dealt with on priority.

c) Similarly, certain life saving and essential gadgets like ventilators etc. were found not only to be in short supply, but also some of them found old and getting non-functional frequently. Monitoring Committee issued directions to remedy the situation as above. Similarly, Monitoring Committee also directed that the Central Monitoring System in the Intensive Care Unit (ICU) should be made functional.

d) Monitoring Committee had been receiving complaints regarding the delay in the dialysis procedure in BMHRC, because of insufficient number of dialysis units, therefore, the Monitoring Committee directed that the number of dialysis units be increased.

e) It was also noted that MRI and CT Scan Machines in BMHRC are not functional. Some other machines like Heart-Lung Machine, Anaesthesia Work Station, C-arm etc. reportedly not functioning properly being old. It was directed that the same be got repaired or replaced and that AMC of above machines be taken for their maintenance by the Administration.

f) Regarding the treatment of cancer patients it was noticed that there is no post of Medical Oncologist. Only the post of Surgical Oncologist is sanctioned and manned in the hospital. Monitoring Committee is of the opinion that the approval of medicine prescribed by the surgical specialist, by a Board constituted for the purpose, results in delay in treatment of the patient, which obviously cannot be said to be satisfactory. It was
therefore suggested that till long term solution is found, a meeting of the Director BMHRC and Director, G.R.R. may be held, so as to discuss and formulate some interim policy, to provide necessary medicines without delay, to the cancer patients receiving treatment at BMHRC. It was also suggested that the cancer patients approaching BMHRC for treatment may be referred to specialized Govt. medical hospital i.e. Jawaharlal Nehru Cancer Hospital, Navodaya Cancer Hospital and Chirayu Medical College & Hospital, Bhopal till final arrangements are made in BMHRC or Hospitals under the control of G.R.R.

g) It was noticed that many posts of Specialists/Super specialists are lying vacant. In this regard, Monitoring Committee is of the opinion that appropriate steps without delay, should be taken for making available regular faculty, specialists/doctors etc. in the hospital.

IV- VISIT OF JAWAHARLAL NEHRU GAS RAHAT HOSPITAL

The report of the visit dtd. 25/11/2016 at Jawaharlal Nehru Gas Rahat Hospital is as per ANN-5. This hospital appears to be very busy hospital with more than 1500 patients approximately reporting in the OPD every day.

a) It was noticed that arrangement for dispensing of medicines was not satisfactory and there was long queues of patients to receive medicines. It was noticed that they have to wait for about one to one and a half hours (1-1½hrs) to receive medicines, as prescribed by the Doctor.

b) Suggestions were made to improve the distribution/dispensation system as is detailed in report ANN-5. The Superintendent of the hospital Dr. Ravi Verma was also directed to take note of the above
situation and resolve the difficulty of the patients, in receiving the medicine.

c) During visit, some of the patients reported that though some medicines are being dispensed by the medicine dispensing counter but some other medicines are not made available and are required to be purchased by them. The Superintendent of the hospital was directed to ensure that all the medicines prescribed by the Doctors are made available to the gas victim patients free of cost.

d) Superintendent of the hospital informed that there was shortage of Medical Officers, Para medical staff as well as other staff. He has also sent various communications in that regard to Director, G.R.R. as is detailed in the report ANN-5. The Director, G.R.R. should look into the matter, and take steps to improve the situation.

e) The Monitoring Committee noted that though in its inspection report dtd. 09/02/2016, it was directed that digital X-ray machine should be installed in the hospital with monitors available to all concerned doctors. However, direction in the above regard was found not complied with, so far. The Superintendent of the hospital informed that digital X-ray facility is proposed to be outsourced by the State Government. The Monitoring Committee is of the opinion that the matter deserves to be reconsidered, and so far as possible facility of digital X-ray should be made available in the hospital premises itself, keeping in view, the convenience of the patients, especially the serious patients.

f) Sonography facility is not available in the hospital. Considering the requirement of large number of
patients it appears desirable that sonography facility be made available in the hospital.

g) It was informed that ENT specialist on full time basis is not posted and the ENT specialists posted at Master Lal Singh Hospital attends ENT department of this hospital thrice a week. It is suggested that ENT Specialist be posted on full time basis. Similarly though two Surgical Specialists are attached in the Hospital but posts of Surgical Specialists are not sanctioned. It was recommended that posts of Surgical Specialists be sanctioned for the Hospital.

h) The main recommendations of the Monitoring Committee are as below:
   a) It be ensured that all the medicines prescribed are made available to the patients.
   b) Proper arrangement should be made for smooth dispensation of medicines at the dispensing counter and counters with staff be increased, for the purpose.
   c) ENT Expert should be posted on full time basis.
   d) Sanctioned strength of doctors and paramedical staff be posted in the vacant posts and as per need, doctors/paramedical and other staff strength be rationalized and increased.
   e) Digital X-ray facility, sonography machine and C-arm table be provided in the premises of the hospital itself.

V - MEETINGS OF MONITORING COMMITTEE:

The Monitoring Committee also held meetings on 05/07/2016(ANN-6), 31/08/2016(ANN-7), 19/10/2016 (ANN-8) & 17/11/2016(ANN-9). Some of the aspects considered in the said meetings are as below:
A- Meeting dtd. 05/07/2016

In the meeting held on 05/07/2016 the matter relating to identification, registration and treatment of persons affected by contamination of water raised in the letter dtd. 01/07/2016 by NGO Bhopal Group of Information and Action was considered. Director, G.R.R. was requested to take action regarding the above matter and inform the same to the Monitoring Committee. Response is still awaited.

B- Meeting dtd. 31/08/2016

In the meeting dtd. 31/08/2016 minutes of which are as per ANN-7, the matter of proposed mass resignation of faculties of BMHRC as informed by letter dtd. 22/08/2016 by the Doctor’s Welfare Association was considered. In the light of the said letter, it was resolved that Department of Health Research, GOI to frame appropriate rules, governing service conditions and other terms and conditions of faculty and doctors and staff serving in BMHRC.

C- Meeting dtd. 19/10/2016

In the meeting dtd. 19/10/2016, representations of the BMHRC Doctor’s Welfare Association dtd. 13/10/206 and 17/10/2016 were considered and the matter was referred to Director, BMHRC as well as Department of Health Research, GOI for appropriate action on the issues raised in the said letters by the Doctor’s Association of BMHRC. In the said meeting, complaints received in the Monitoring Committee regarding treatment to certain gas victim patients was taken up, and appropriate action taken thereon.

D- Meeting dtd. 17/11/2016

In the meeting dtd. 17/11/2016, the matter relating to treatment of certain gas victim patients was taken up and action taken thereon. It was further resolved in the meeting that Director, BMHRC be informed that in case surgery is undertaken in BMHRC, it should be ensured
by BMHRC and Director, G.R.R., that gas victim cancer patient does not suffer un-necessarily for want of post operative management, may be in the form of Chemotherapy or Radiotherapy which might be found essential for treatment to cancer patients and due attention to be given to financial aspect of such treatment.

The Committee also expressed its opinion that as Gas Relief Hospitals are spread over various locations in the city, it would be appropriate that one of such hospitals, preferably centrally located, is provided with an ICU with all necessary basic requirements - equipments etc and with specialist doctor who should be readily available for emergency treatment.

Matters inter alia relating to computerization of Gas Rahat Hospitals as well as BMHRC was considered in the meeting dtd. 09/06/2016 which is as per ANN-10.

The main recommendations are as below:

a) Computerization of all Gas Rahat Hospitals as well as BMHRC and interlinking of data available with all Gas Rahat Hospitals so as to be readily available.

b) Framing of service rules, Ensuring availability of Specialists/Doctors and Others in BMHRC as well as Gas Rahat Hospitals. Thorough and in depth analysis is required to be made to find out the basic cause for change for worse, in the above regard, from the time of BMHT, and to ensure availability of specialists/senior doctors etc.

c) Common Referral System be evolved.

d) Equipments and Gadgets such as ventilators, C.T. Scan, Dialysis Units etc. be repaired/replaced and made available.

e) Prompt release of funds and no delay purchase
policy for making available specific medicines of treatments to patients especially those referred outside Gas Rahat Hospitals.
f) Prompt responses to the information sought by Monitoring Committee, from Director BMHRC, Director G.R.R. as well as Gas Rahat Hospitals. Responses should be communicated through Responsible Officers.

It is therefore recommended:

1. Ayush Department should ensure supply and availability of all essential medicines in the Homeopathy Dispensary, Tilajamalpura Bhopal as well as other dispensaries under its control.

2. Necessary equipments/instruments to be provided in Rasool Ahmed Siddiqui Pulmonary Medicine Centre and vacant posts in the said Hospitals to be filled up.

3. Recommendations as contained under Para-III should be directed to be complied with by GOI, State Government, BMHRC and Department of G R.R.

4. It would be appropriate that one of the hospitals, preferably centrally located, is provided with an ICU with all necessary basic requirements - equipments etc and with specialist doctor who should be readily available for emergency treatment.

5. Recommendations as per Para-IV above be complied with by Superintendent of Jawaharlal Nehru Gas Rahat Hospital as well as State Government through the Director, G.R.R. and especially:
   a) It be ensured that all the medicines prescribed are made available to the patients.
   b) Proper arrangement should be made for smooth
dispensation of medicines at the dispensing counter and counters with staff be increased, for the purpose.

c) ENT Expert should be posted on full time basis.
d) Sanctioned strength of doctors and paramedical staff be posted in the vacant posts and as per need, doctors/paramedical and other staff strength be rationalized and increased.
e) Digital X-ray facility, sonography machine and C-arm table be provided in the premises of the hospital itself.

6 Director, BMHRC should ensure compliances of directions in Para-III as well as in Para V B,D, and other.

7 The recommendations relating to Jawaharlal Nehru Gas Rahat Hospital mentioned in Para (IV) (h) be complied with. It is expected that all the above responses from Director, BMHRC as well as Director, G.R.R., Ayush and Superintendent of Gas Rahat Hospitals are promptly sent through responsible officers.

(Justice V.K. Agarwal)
Chairman

(Dr. Nirbhay Shrivasta)
Member

(Dr. B.P. Dubey)
Member

(Purnendu Shukla)
Member

(Dr. K.K. Thassu)
Member Secretary & Convener